

INTERCOLLEGIATE BROADCASTING SYSTEM

MEMBERSHIP APPLICATION

To:
Board of Directors, % Manager of Member Services
Intercollegiate Broadcasting System

Institution: _____

Date: _____

Gentlemen:

The _____ operating station _____ desires to
(Name of Organization) (Call Letters)
apply for Membership in the Intercollegiate Broadcasting System. In accepting Membership in the Intercollegiate
Broadcasting System we, the undersigned, certify that the _____
(Name of Organization)

agrees to comply with the By-Laws and the Codes of the Intercollegiate Broadcasting System as established by the
IBS Governing Council and agrees to pay the established annual dues of thirty-five dollars (\$35.00)* for Member
groups, for which it shall remain liable unless written notice of its resignation shall have been submitted to and *ack-
nowledged by* the Intercollegiate Broadcasting System.

The plans for operating this broadcast station have been approved by _____
(Name)

_____ who is _____ of the college, university, institute. A
(Title)

Faculty Advisor, _____ has been appointed
(Name)

(Signed) (Title)

(Signed) (Title)

(Signed) (Title)

Conditional Status—Groups with non-profit, educational, campus-limited broadcast facilities contemplated or under construction. Annual dues \$35.00.*

Membership—Groups operating non-profit, educational, campus-limited broadcast stations in accordance with all IBS Codes, and represented on the IBS Governing Council. Annual dues \$35.00.*

* In each year of affiliation except the first, a reduction of \$5.00 is allowed for payment within 30 days of invoice.